CALIFORNIA LIQUID WASTE HAULER RECORD

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SFUND RECORDS CTR 999000510

STATE WATER RESOURCES CONTROL BOARD STATE DEPARTMENT OF HEALTH

Thysical State:				Compenents: (Endmplest Hydrochiczic acid, lime, caustic soda, (Endmplest Hydrochiczic acid, lime, caustic soda, phenolica, nolventa (list), metals (list), preparics (list), cymnids) organics (list), cymnids)		Pasticides 10. 0 Paint sludge 11. 0 Solvent 12. 0 Termethyl land sludge 13. 0 Chemical collet vastes 14. 0	DESCRIPTION OF WASTE (Mast be filled by producer) Check type of wastes: 1. Acid solution 0. Tank bottom sediment 0. 1 ott	type of Process AGTO A Tive (Examples: metal plating, equipment classing, oil drilling-Code No. unstructor treatment, picking bath, petroleum refining)	105 Ang 6/65 m. 101 phone 1 month (213) \$212720 7:0. or contract 1	PRODUCER OF WASTE (Must be filled by producer) were (print or type): WES OCK
\$03626V X	The site operator shall submit a legible copy of each completed Record to the State Department of Health with monthly fee reports.	Disposal Date: Suppose of suppose of perjury that the foregoing is true	recovery	Guantity measured at site (if applicable):	The hauler above delivered the described waste to this disposal facility and it was an acceptable material under the terms of RMCB requirements. State Department of Health regulations and local restrictions.	disposer)	I cartify named below and was accepted. I cartify (or declare) inder penalty of perjury that the foregoing is true and correct.	4 P 2	ا شِ جُ :	MAULER OF VASTE (Must be filled by hauler) News (print or type): Supportion Industrial Dimpoint Di

PRODUCER OF WASTE (Must be filled by po

FOR INFORMATION RELATED TO SPILLS OR OTHER DIRECTED INVOLVING HAZARDOUS VASTE OR OTHER NATERIALS CALL (800) 424-9300. L. - نغر

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

authorized agent and title

The waste is described to the best of my ability and in a licensed liquid waste hauler (if applicable)